United Nations S/2016/957

Security Council

Distr.: General
11 November 2016

Original: English

Letter dated 8 November 2016 from the Secretary-General addressed to the President of the Security Council

I have the honour to refer to Security Council resolution 1983 (2011), in which the Council invited me to provide further information, as appropriate, relating to urgent and coordinated international action to curb the impact of the AIDS epidemic in conflict and post-conflict situations.

In the five years since the adoption of resolution 1983 (2011), there have been many developments in the global effort to combat the AIDS epidemic. There has been tremendous progress in the expansion of medical treatment for people living with HIV, resulting in a significant decline in the number of AIDS-related deaths. At the same time, however, the number of new infections among adults has remained steady at an estimated 1.9 million annually. In the light of these two independent trends, conflict-related disruption of life-saving HIV treatment is likely to become more common. The goal of ending the AIDS epidemic by 2030, as reflected in Goal 3 of the Sustainable Development Goals, is important in both conflict and post-conflict settings. Achieving this goal will require strengthening our collaborative efforts.

During the June 2016 high-level meeting on ending AIDS, the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the Department of Peacekeeping Operations organized a side event entitled "HIV and security: past, present and future". Participants cautioned that HIV and high-risk social drivers such as sexual violence during conflicts and humanitarian crises must be squarely addressed both during and after conflicts and in humanitarian crises.

In parallel with the high-level meeting, UNAIDS and the Department of Peacekeeping Operations conducted a review of the implementation of resolution 1983 (2011). While the Security Council in that resolution called for a global response to curb HIV/AIDS in conflict and post-conflict situations, with support from Member States, United Nations entities and international financial institutions, the review focused on the critical role of peacekeeping operations as a part of the global effort.

The review found that there was near universal provision of HIV-related training and services to United Nations peacekeeping personnel, while the integration of HIV service delivery in mandated activities was dependent on a number of factors, including the mandate of the mission, available resources and partnerships with other United Nations entities. In addition, the review highlighted the need for links

Please recycle

between efforts to address HIV and efforts to address sexual and gender-based violence, including conflict-related sexual violence. It also pointed out the need to further reinforce system-wide United Nations cooperation to address HIV in emergency settings, including conflict and post-conflict situations, to apply the latest knowledge and to ensure the most effective use of limited resources.

The review found that at least six peacekeeping operations[1] had incorporated HIV-related communications and outreach into mandated mission tasks. Those missions contributed to national AIDS responses by providing HIV sensitization and awareness training to national military forces, national police forces, ex-combatants and internally displaced persons, training peer educators within national uniformed services and extending voluntary HIV testing and counselling, condom distribution and post-exposure prophylaxis to the host population. The extent to which external HIV activities are integrated into the mandated tasks depends on the scope of the mission mandate, the levels of human and financial resources available and the level of collaboration with other United Nations entities and partners. Such collaboration also facilitates a smoother transition to United Nations post-conflict support.

Since the adoption of resolution 1983 (2011), there has been a stronger recognition of the links between sexual and gender-based violence, including conflict-related sexual violence, and increased risk of HIV infection. In its resolution 2106 (2013), the Security Council urged United Nations entities, Member States and donors to support the development and strengthening of capacities of national health systems and civil society networks in order to provide sustainable assistance to women and girls living with or affected by HIV and AIDS in armed conflict and post-conflict situations. Women's protection advisers and focal points in several missions[2] have been mainstreaming HIV/AIDS considerations in their advocacy, political engagements and preventive measures. However, it is necessary to strengthen action to address those links.

In its resolution 1983 (2011), the Security Council requested me to strengthen ongoing work to prevent and combat sexual exploitation and abuse. In my report on combating sexual exploitation and abuse (A/71/97), not only did I reiterate my strong belief that this Organization should never remain silent or indifferent in the face of reported incidents, irrespective of the perpetrators, but also I laid out a comprehensive strategy to ensure that United Nations entities work actively and in unity.

The response to AIDS has moved from emergency management of a global crisis to a systematic effort to deliver HIV-related services at the level required to end AIDS as a public health threat by 2030. Data trends underscore the importance of continued engagement by the United Nations within conflict and post-conflict settings during this phase of the response.

---

[1] The United Nations Multidimensional Integrated Stabilization Mission in Mali (MINUSMA), the United Nations Stabilization Mission in Haiti (MINUSTAH), the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO), the African Union-United Nations Hybrid Operation in Darfur (UNAMID), the United Nations Mission in South Sudan (UNMISS) and the United Nations Operation in Côte d'Ivoire (UNOCI).

[2] The United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA), MINUSMA, MONUSCO, UNAMID, UNMISS and UNOCI.

To ensure the most effective use of the limited resources available to the United Nations system, the review recommended strengthening the architecture for joint United Nations action against AIDS in emergency settings, including conflict and post-conflict situations, to reflect the most recent international commitments on AIDS and conflict-related sexual violence, and applying the latest knowledge on effective responses to HIV in a variety of settings. That should include an updated cooperation framework among relevant United Nations entities that extends beyond UNAIDS and the Department of Peacekeeping Operations to support responses to AIDS in emergency settings and that reflects the comparative advantages, roles and responsibilities of each entity. Such a framework should clearly define who does what on the ground and at Headquarters.

I count on your support and endorsement of the continuation of this important work, which I encourage my successor to take forward.

I should be grateful if you would bring the present letter to the attention of the members of the Security Council.

(*Signed*) **BAN** Ki-moon